

From: [HHSA, BHSCST](#)
To: [HHSA, BHSCST](#)
Subject: BHS Information Sharing Notice | Fiscal Year (FY) 2023-2024 End Letter
Date: Monday, May 13, 2024 3:38:16 PM
Attachments: [image001.jpg](#)
[BHS Information Notice Administrative Adjustment Request \(AAR\) Policy Changes and Updates.msg](#)
[1a. Administrative Adjustment Request \(AAR\) Template.pdf](#)
[2. BHS Inventory Report Form.xlsx](#)
[2a. BHS Inventory Guidelines for County Contracts.pdf](#)
[2b. BHS Inventory Form EXAMPLE.xlsx](#)
[BHS Information Sharing Notice Updates to Contractor Inventory Process.msg](#)
[3. BHS Contracts Signature Authorization Form \(SAF\) FY 24-25 with Instructions.pdf](#)
[3a. Electronic Signatures for Contracts - Fact Sheet.pdf](#)
[4. BHS Budget Template - Cost Reimbursement FY 24-25.xlsm](#)
[4a. BHS Subcontractor Consultant Pre-Approval Form.pdf](#)
[4b. BHS Subcontractor-Consultant Agreement Contractor Checklist FY 24-25.pdf](#)
[5. BHS Attestation Form FY 24-25.pdf](#)
[2024-05-13 - Fiscal Year 2023-2024 End Letter.pdf](#)

The attached letter and attachments are being sent on behalf of Adria Cavanaugh, Chief, Agency Operations Behavioral Health Services (BHS)

Bcc'd to BHS Contracted Providers

Hello,

This notice contains information that may impact staff in your organization who are not on our distribution list. Please share with or forward to pertinent staff accordingly.

If you have any questions or need assistance, please contact your Contracting Officer's Representative (COR) and/or Contract Analyst.

Please review the Fiscal Year (FY) 2023-2024 End Letter and the following attachments included in this email:

1. 2024-03-08 – BHS Information Notice_BHS Administrative Adjustment Request (AAR) Policy Changes and Updates
 - o 1a. Administrative Adjustment Request (AAR) Template
2. BHS Inventory Report Form
 - o 2a. BHS Inventory Guidelines for County Contracts
 - o 2b. BHS Inventory Report Form – EXAMPLE
 - o 2c. 2024-05-10 – BHS Info Notice - Updates to Contractor Inventory Process
3. BHS Contracts Signature Authorization Form (SAF) FY 24-25 with Instructions
 - o 3a. Electronic Signatures for Contracts - Fact Sheet
4. BHS Budget Template – Cost Reimbursement FY 24-25
 - o 4a. BHS Subcontractor/Consultant Pre-Approval Form
 - o 4b. BHS Subcontractor/Consultant Agreement Contractor Checklist

5. BHS Attestation Form FY 24-25

Please note that the BHS Contractor Distribution List is based on authorized signatories listed on the BHS Contracts Signature Authorization Form (SAF). To update the recipient list for your organization, please coordinate with your respective COR.

For any undeliverable emails, the contact will be removed from the BHS Contractor Distribution List.

Respectfully,

Contract Support Team (CST)

Behavioral Health Services

County of San Diego Health & Human Services Agency

BHSCST.HHSA@sdcounty.ca.gov

